

Iowa Department of Human Services

INFORMATIONAL LETTER NO. 1960-MC-FFS

DATE: November 13, 2018

TO: Iowa Medicaid Community-Based Neurobehavioral Rehabilitative

Services (CNRS) Providers, General Institutional

APPLIES TO: Managed Care (MC) and Fee-for-Service (FFS)

FROM: Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

RE: 2018 CNRS Provider Quality Management Self-Assessment

EFFECTIVE: Upon Receipt

The CNRS Provider Quality Management Self-Assessment process was developed as one method for the state to gather data to support the quality framework performance measures as required by the Centers for Medicare and Medicaid Services (CMS). The provider self-assessment process mirrors a CMS review process by requiring providers to develop a quality improvement system of monitoring their own performance and then "showing" the state how it provides quality oversight.

The self-assessment requires a provider to identify that they follow the applicable policies and procedures that the state has established based on the Code of Federal Regulation (CFR), lowa Administrative Code (IAC) requirements, lowa Code (IC), and best practices. The focus of the 2018 CNRS Provider Quality Management Self-Assessment and subsequent review activities is to assist providers in regulatory compliance and quality improvement and is a required component for enrollment as an Iowa Medicaid provider, regardless of the population of members served. Loss of enrollment with Iowa Medicaid results in loss of enrollment with any contracted Managed Care Organization (MCO).

Once the core policies and procedures have been established through the self-assessment, Quality Improvement Organization staff utilizes two methods of discovery to verify the ongoing implementation of a provider's quality performance activities: 1) annual self-assessment and 2) quality reviews. The reviews are completed onsite.

This system of provider oversight is required for all Medicaid providers enrolled in CNRS.

Training:

A recorded webinar is currently available to further outline the 2018 CNRS Provider Quality Management Self-Assessment and expectations for completion. The webinar can be found on the DHS website. As questions come in, they will be added to the Frequently Asked Questions (FAQ) document that will be posted on the DHS website.

¹ https://dhs.iowa.gov/ime/members/medicaid-a-to-z/cnrs/sa

Instructions for Self-Assessment

The completed self-assessment form must be received by the IME no later than January 1, 2019. Failure to submit the required documents by January 1, 2019, will jeopardize your agency's Medicaid enrollment.

The Quality Improvement Organization staff will confirm receipt of the materials. If an agency or Quality Improvement Organization staff identifies corrective action is required, the agency will be notified and it is the agency's responsibility to develop the corrective action plan. Technical assistance may be requested from the Quality Improvement Organization.

Questions about this informational letter or completion of the 2018 CNRS Provider Quality Management Self-Assessment form should be directed via email to (CNRS@dhs.state.ia.us).